CCEC Administrative Rule Briefing

Program Name/OAR #: Healthy Families Oregon/414-525 Date: July 20, 2017 Staff/Office: Nakeshia Knight-Coyle, Erin Deahn Statutory Authority: ORS 326.425(7); ORS 417.705-417.797	
☐ Temporary Rule ☐ New Rule Prompted by: ☐ State law changes	☑ Amend Existing Rule☐ Federal law changes☐ Other
Last Revised: November 25, 2014	
Action Requested: ☐ Adoption of Temporary Rule	⊠ Adoption of Final Rule

Program Summary:

The Healthy Families America model (currently known in Oregon as Healthy Families Oregon) was developed in 1992 by <u>Prevent Child Abuse America</u>. Healthy Families Oregon (HFO) has been funded through the state general fund since 1993. Prior to coming to the Early Learning Division (ELD) in 2012, HFO was administered by the Oregon Commission on Children and Families.

Eligible Population:

HFO is available to all families if:

• They score two or more "1's" on the New Baby Questionnaire (NBQ). The NBQ is a standardized risk screening tool used to systematically identify families at risk for other adverse childhood experiences.

OR

• If the family has any of the three single indicator risks present (depression/, anxiety, past or current child welfare involvement or drug/alcohol use).

Population Served:

Approximately 3,000 families are served with 1:1 home visits each year, receiving support and coaching through Healthy Families Oregon.

Currently serving an estimated 21% of eligible families.

In 2013, services expanded from only first-births to subsequent.

Stakeholders Impacted:

Providers: Local community agencies who administer HFO.

Children and families: HFO is available to all vulnerable families who score "positive" on the NBO.

Communities hosting HFO program: All Oregon counties have an HFO program.

Stakeholders Consulted:

In 2015, the Best Beginnings Committee of the Early Learning Council (BB) became the advisory body for the HFO program.

Best Beginnings Members:

Martha Brooks, Committee Chair

Elena Rivera, Committee Co-Chair

Health Policy & Program Advisor- Children's Institute

James Barta, Legislative Director, Children First for Oregon

Cindy Bond, Old Mill Center for Children and Families

Marguerite Kenagy, HFO Program Manager - Marion & Polk Counties

Jessica Britt, HFO Program Manager - Umatilla & Union Counties

Beth Green, Director of Early Childhood & Family Support Research - PSU

Christy Cox, Early Childhood Development Program Officer, Ford Family Foundation

Lindsey Manfrin, Public Health Manager- Yamhill Public Health

Janet Dougherty-Smith, Early Learning Council Member

Donalda Dodson, Executive Director, Oregon Child Development Coalition

ELD Staff:

Nakeshia Knight-Coyle –Director of Programs & Cross Systems Integration

Erin Deahn – HFO Program Coordinator

Elisabeth Underwood – HFO/MIECHV Program Specialist

Linda Jones – committee staff support

OHA Staff:

Cate Wilcox

Benjamin Hazelton

Zero to Three

Jamie Colvard – providing TA to the committee

List of Other interested parties:

Need for Rule:

Historically, Healthy Families Oregon (HFO) programs have been required to contribute a 25 percent match to their general fund allocation. Five percent of this 25 percent has been required as cash, while the remaining could be a combination of in-kind and cash. The request at hand is to eliminate the match requirement.

Original rule language included a 20 percent match requirement. This increased to 25 percent, with 5 percent cash, by direction of a 2005 budget note to House Bill 5112. Match is calculated by taking 25 percent of each HFO program's general fund allocation. Of this 25 percent, 5 percent must be cash (or cash equivalent), while the rest can be a combination of in-kind and cash. Programs submit their two year budgets to ELD, which must include their 25 percent match and show how it is being invested into their program.

Policy matters or questions to be addressed:

In March 2017, BB Committee voted to recommend a rule change to remove the 25 percent match requirement. While stipulated in rule, this match requirement has never been in statute.

Large programs struggle to meet their match because their allocations are large, which results in a larger match requirement.

Some programs receive significant support from their local community/county because of this match requirement. There is concern that this support would go away without the match requirement.

There is the potential for programs to serve a smaller number of families, as the removal of the 25% match could result in a reduction of the local program budget.

Fiscal Impact:

The burden that the 25 percent match places on rural programs makes this an important fiscal and equity concern. Our smallest (rural & frontier) programs could accept additional funding if available, but are very reluctant because they do not have the local resources to meet the match requirement. This results in resource deficient communities having to turn down additional funding for needed services. Nothing in the proposed rule language precludes a community from fundraising.

Small, rural programs can take on increased funding, if available, and not pose a risk to their agency by not being able to meet the match requirement. This would result in serving additional families in these areas. Without the match requirement, programs can focus on critical services to families, instead of using staff time for fundraisers.

Equity Analysis:

- Who are the racial/ethnic and underserved groups affected?
- > Do the proposed rules ignore or worsen existing disparities or produce other unintended consequences?

The proposed rule will provide the opportunity for very small programs in rural areas that lack resources, to accept more funding when available, because they will not need to worry about their inability to meet the matching requirement.

Unintended Consequences – there is the potential, for programs that have additional funding streams (i.e. – county, etc.) or a hosting agency who donates a lot of match, that they would withdraw their funding because the match is no longer required.

What is the impact of the rules on eliminating the opportunity gap?

Elimination of the rule allows our smallest/rural/frontier programs the ability to expand services with additional funding. Currently our smallest/rural programs have turned down additional funding (which would create additional resources in a resource-lacking community) because they knew they were unable to get the 25% match.

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- What are the barriers to more equitable outcomes? (e.g., mandated, political, emotional, financial, programmatic or managerial)
- How have you intentionally involved stakeholders who are also members of the communities affected?
 - There are a few HFO Program Managers on the BB Committee. The Chair and one member of the BB Committee serve ad hoc on the CCEC for this rule revision.
- > How will you modify or enhance strategies and rules to ensure each learner and communities' individual and cultural needs are met?